## RECEIVED<sup>N</sup> CENTRAL FAX CENTER

## MAR 14 2006

Customer No. 24113
Patterson, Thuente, Skaar & Christensen, P.A. 4800 IDS Center
80 South 8th Street
Minneapolis, Minnesota 55402-2100

Attorney Docket No. 2950.20US01

Telephone: (612) 349-5740 Facsimile: (612) 349-9266

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of Application No. 09/845,985, filed April 30, 2001 for: PHOSPHATE POWDER COMPOSITIONS AND METHODS FOR FORMING PARTICLES WITH COMPLEX ANIONS, by: Benjamin Chaloner-Gill, Allison A. Pinoli, Craig R. Horne, Ronald J. Mosso and Xiangxin Bi.

1.	Submission required under 37 C.F.R. § 1.114								
	a.	[]	Previously submitted  [ ] Please enter in the present application the unentered Amendment under 37 C.F.R. § 1.116, with any attachments, filed on in said prior application.  [ ] Consider the arguments in the Appeal Brief or reply Brief previously filed on  [ ] Other						
	b.	[X]	<ul> <li>Enclosed</li> <li>A Preliminary Amendment. Claims added by this Amendment are properly numbered consecutively beginning with the number next following the highest numbered claim in the prior application.</li> <li>Affidavit(s)/Declaration(s)</li> <li>Information Disclosure Statement (IDS)</li> <li>Other Preliminary Remarks</li> </ul>						

## 2. [X] The filing fee is calculated below:

	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra (Equals)	Small Entity Rate	Add'l Fee	OR	Large Entity Rate	Add'i Fcc
Total		- **	=	x 25	\$		x 50	\$
Indep.		_ ***	-	× 100	s		x 200	i c
RCE fee				+ 395	S	<del></del>	+ 790	*
Mult, Dep.			-	+ 180	\$		+360	\$
				TOTAL	\$395.00	OR	TOTAL.	s

<sup>[ ]</sup> First Presentation of Multiple Dependent Claim [MDC]

03/15/2006 TL0111 00000040 160631 09845985

If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3. 92 EC:2891

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent hox in Column 1 of a prior Amendment or the number of claims originally filed.

Application No. 09/845,985

3. [X] The Commissioner is hereby authorized to charge the amount of \$395.00 to cover the RCE fee, and to grant any extensions of time and to charge any fees under 37 C.F.R. §§ 1.16 and 1.17 that may be required during the entire pendency of this application to Deposit Account No. 16-0631.

Respectfully submitted,

Peter S. Dardi, Ph.D. Registration No. 39,650

Please grant any extension of time necessary for entry; charge any fee due to Deposit Account No. 16-0631,

## CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office, Fax No. 571-273-8300 on the date shown below thereby constituting filing of same.

March 14, 8006

Peter S. Dardi